

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL043029	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 04/12/2016
NAME OF PROVIDER OR SUPPLIER ABSOLUTE CARE ASSISTED LIVING		STREET ADDRESS, CITY, STATE, ZIP CODE 431 JUNNY ROAD ANGIER, NC 27601		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
C 000	Initial Comments Report of Biennial Construction Survey by Frank Strickland on 4/12/2016: Information obtained from the DHSR database indicates that this facility was licensed on 03/10/1997 for a Home for the Aged serving 12 ambulatory clients. Therefore, this facility must meet the 1986 North Carolina State Building Code Section 419.5, and, the 1991 and applicable portions of the 2005 Rules for the Licensing of Adult Care Homes. Deficiencies were cited and a Plan of Correction is required.	C 000	CONSTRUCTION SECTION MAY 19 2016 RECEIVED	
C 164	Housekeeping and Furnishings-Clean, Repaired SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; (2) have no chronic unpleasant odors; (3) have furniture clean and in good repair; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1-Based on observation, the facility has not maintained and serviced the HVAC supply and return air grilles. Findings on 04/12/2016: The exhaust grilles have excessive particulate build-up in the Laundry Room and bathrooms.	C 164	In order to be in compliance with rule 10A NCAC 13.F .0306 the facility maintenance personnel have cleaned the exhaust grilles. The facility maintenance personnel will inspect the grilles monthly. The administrator will monitor quarterly for compliance.	5/20/16

Division of Health Service Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE SIGNATURE

STATE FORM

8EFV2

If continuation sheet 1 of 3

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL043028	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 04/12/2016
NAME OF PROVIDER OR SUPPLIER ABSOLUTE CARE ASSISTED LIVING		STREET ADDRESS, CITY, STATE, ZIP CODE 431 JUNNY ROAD ANGIER, NC 27501		
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C 175	Continued From page 1	C 175		
C 175	Bedroom Furnishings-Clean Towel, Towel Bar SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0308 HOUSEKEEPING AND FURNISHINGS (b) Each bedroom shall have the following furnishings in good repair and clean for each resident: (7) Individual clean towel, wash cloth and towel bar in the bedroom or an adjoining bathroom; and (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1-Based on observation, the facility has not maintained and provided towel bars in the Resident Bathrooms for each resident. Findings on 03/16/2016: There are not sufficient number of towel bars in the bathrooms for Rooms 3/4 and Rooms 5/6.	C 175 C 175	In order to be in compliance with rule 10A NCAC 13.F .0306 the facility maintenance personnel will install sufficient towel bars for all residents. The administrator will monitor quarterly for compliance.	5/30/16
C 189	Building Equipment Maintained Safe, Operating SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (a) The building and all fire safety, electrical, mechanical, and plumbing equipment in an adult care home shall be maintained in a safe and operating condition. (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities. This Rule is not met as evidenced by: 1-Based on observation, the facility has not maintained in a safe manner piping that	C 189	In order to be in compliance with rule 10A NCAC 13.F .0311, the facility maintenance personnel will caulk ceiling in Sprinkler Riser Room with fire proof caulking. The administrator will monitor quarterly for compliance.	5/30/16

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C 189	Continued From page 2 penetrates the roof/ceiling assembly. This will affect all residents and staff in the event that fire and/or smoke is not contained in a room or compartment of origin. Findings on 04/12/2016: The sprinkler riser that penetrates the ceiling and an adjacent mc cable are not sealed that are located in the Sprinkler Riser Room.	C 189		

Division of Health Service Regulation
STATE FORM

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